



**DECLARATION AND POWER OF  
ATTORNEY FOR UTILITY OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing      ☒ Declaration Submitted after Initial Filing

Attorney Docket No.	1181-282
First Named Inventor	Martin C.M.M. Barnardo
COMPLETE IF KNOWN	
Application Number	10/623,802
Filing Date	July 22, 2003
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: METHOD the specification of which was filed on July 22, 2003 as United States Application Number or PCT International Application Number 10/623,802.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Numbers	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>


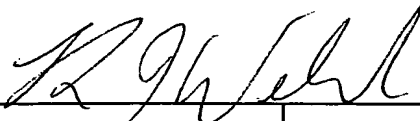
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/190,027	03/17/2000

I or we hereby appoint the registered practitioner(s) associated with Customer No. **6449** to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Direct all correspondence to Customer Number **6449**.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

<b>NAME OF FIRST INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Martin C. M. M.</b>		Family Name or Surname <b>Barnardo</b>	
Inventor's Signature <i>M. Barnardo</i>		Date <b>08-04-2004</b>	
Residence: City <b>Oxford</b>	Country <b>United Kingdom</b>	Citizenship <b>United Kingdom</b>	
Mailing Address <b>Oxford Transplant Centre</b>			
Mailing Address <b>Churchill Hospital</b>			
City <b>Oxford</b>	Postal Code <b>OX3 7LJ</b>	Country <b>United Kingdom</b>	
<b>NAME OF SECOND INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Andrea W.</b>		Family Name or Surname <b>Harmer</b>	
Inventor's Signature <i>A. W. Harmer</i>		Date <b>5/5/2004</b>	
Residence: City <b>Sheffield</b>	Country <b>United Kingdom</b>	Citizenship <b>United Kingdom</b>	
Mailing Address <b>Trent Centre</b>			
Mailing Address <b>Longley Lane</b>			
City <b>Sheffield</b>	Postal Code <b>OX3 7LJ</b>	Country <b>United Kingdom</b>	
<b>NAME OF THIRD INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Michael</b>		Family Name or Surname <b>Bunce</b>	
Inventor's Signature <i>M. Bunce</i>		Date <b>1-4-03</b>	
Residence: City <b>Bromborough</b>	Country <b>United Kingdom</b>	Citizenship <b>United Kingdom</b>	
Mailing Address <b>11 Bassendale Road</b>			
Mailing Address			
City <b>Bromborough</b>	Postal Code <b>CH62 3QL</b>	Country <b>United Kingdom</b>	

<b>NAME OF FOURTH INVENTOR:</b>		[ ] A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Robert W.</b>		Family Name or Surname <b>Vaughan</b>	
Inventor's Signature 		Date <b>14.04.04</b>	
Residence: City	<b>London</b>	Country	<b>United Kingdom</b>
Mailing Address		<b>South Thames Tissue Typing</b>	
Mailing Address		<b>Guy's Hospital</b>	
City	<b>London</b>	Postal Code	<b>SE1 9RT</b>
		Country	<b>United Kingdom</b>
<b>NAME OF FIFTH INVENTOR:</b>		[ ] A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Kenneth I.</b>		Family Name or Surname <b>Welsh</b>	
Inventor's Signature 		Date <b>8-05-04</b>	
Residence: City	<b>London</b>	Country	<b>United Kingdom</b>
Mailing Address		<b>National Heart and Lung Institute</b>	
Mailing Address		<b>Emmanuel Kaye Building, Manresa Road</b>	
City	<b>London</b>	Postal Code	<b>SW3 6LY</b>
		Country	<b>United Kingdom</b>